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ABSTRACT

In an effort to determine the effectiveness of Lakeshore Technical Institute's (LTI's) Associate Degree Nursing (ADN) program, questionnaires were administered to 1982 program graduates (N=45) and their employers (N=43) requesting an assessment of the graduates' preparedness to perform 39 nursing functions. Responses were submitted to a discriminant analysis to determine whether there was a significant difference between employers' and graduates' responses. Study findings, based on an overall response rate of 83%, included the following: (1) for 67% of the nursing functions, the mean combined rating of the graduates and employers was at or above 2.51 on a scale of 1 (poorly prepared) to 3 (well prepared); (2) the remaining functions received mean combined ratings between 2.0 and 2.5; (3) no function had a calculated composite mean of less than 2.0; and (4) the graduates rated themselves at a higher level of preparedness than their employers for 16 of the 17 functions for which there was a significant difference between the two groups' ratings. It is recommended that: (1) results of the study be used as supportive data for program effectiveness; (2) program staff address itself to differences in expectations between nursing staff and employers; and (3) results of the study be submitted to the Wisconsin State Board of Nursing to indicate support for program effectiveness. The survey instruments are appended. (PAA)

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DETERMINATION OF LAKESHORE TECHNICAL INSTITUTE
ASSOCIATE DEGREE NURSING GRADUATES'
NURSING COMPETENCIES LEVEL

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A PRACTICUM PRESENTED TO NOVA UNIVERSITY IN PARTIAL FULFILLMENT
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ABSTRACT

AUTHOR: Schrader, Marvin A., Ed.S.
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The purpose of this study was to obtain data to determine the effectiveness of the Lakeshore Technical Institute (LTI) Associate Degree Nursing (ADN) program. The study involved the functions learned by the graduates of the 1982 class. An indication of effectiveness in 39 functions was determined from responses from nursing supervisors and graduates. A comparison of nursing supervisors' responses and graduates' responses was made.

The data were submitted to a discriminant analysis to determine if there was a significant difference between the nursing supervisors' responses and the graduates' responses. A .05 level of significance in the means of the two groups of respondents was used. The data were also tabulated to determine the level of effectiveness of the ADN program for each of the functions.

The null hypothesis, "The preparedness level of the ADN graduates for each of the 39 nursing functions is at least the 'moderately-prepared' level as expressed by the mean of the composite responses of employers and graduates," could not be rejected as the means were all above 2.00. The null hypothesis, "There is no significant difference

between the preparedness level of each nursing function as expressed by employers and the mean preparedness level of each nursing function as expressed by graduates" was accepted as there was a significant difference between the employers' responses and graduates' responses for 17 of the 39 nursing functions.

It is recommended that (1) the results of this study be used as supportive data for the level of effectiveness of the content and methodology of the LTI ADN program, (2) the LTI ADN program staff address itself to the expectations of the 17 functions in which there were significant differences to determine what differences in expectations exist between nursing staff and employers, and (3) the results of the study be submitted to the Wisconsin State Board of Nursing to indicate the employer and graduate support for the effectiveness of the LTI ADN program in providing adequately trained graduates to function in the types of facilities for which they were trained.

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INTRODUCTION

The Vocational, Technical, and Adult Education (VTAE) System in Wisconsin was developed to train posthigh school persons for the world of work. The mission is stated in the Wisconsin Statutes (see Appendix A). "The long-term goal of vocational education is to meet the manpower needs of the nation. The needs have been construed to mean a sufficient quantity and quality of trained persons for the labor force (Asche and Vogler:1980:16)." To accomplish this, the Wisconsin VTAE System has been organized into sixteen districts, one of which is the Lakeshore Vocational, Technical and Adult (VTAE) District, also known as Lakeshore Technical Institute (LTI) (see Appendix B).

The Lakeshore VTAE District operates 55 less-than-one-year, one-year, and two-year vocational diploma and two-year associate degree programs. These are designed primarily to meet the manpower needs of the two-county area served, although several regional and statewide programs are offered. It is a state mandate that programs receive approval from the Wisconsin VTAE System prior to their being offered. Several programs (i.e., Nursing Technical) have also required approval from another state agency before being offered.

Nursing Technical is one of the fifty-five programs offered at LTI. Commonly referred to as the Associate Degree Nursing (ADN) program, it was begun in 1974 to provide a continuous supply of registered nurses (R.N.) for district clinics, hospitals, and nursing homes as the previous supplier, Holy Family Hospital located in Manitowoc, Wisconsin, decided to eliminate its educational unit. While both prepared graduates were

eligible for the same Wisconsin State Board Test Pool (WSBTP) Exam and, upon passing, could become registered nurses, the two-year associate degree preparation was more technically oriented than the Holy Family Hospital three-year diploma program.

The technical nurse is trained to provide nursing care to patients in clinics, hospitals, and nursing homes. The Dictionary of Occupational Titles (D.O.T.) code is 075.374-010, and the job description listed in the Wisconsin VTAE Career Information is similar for the position throughout the nation.

Job Description: an associate degree nurse assists in the planning of the nursing care, gives general nursing care, and assists in the evaluation of the nursing care given. Plan nursing activities for patients and assist them to participate in their own care; administer hygienic care and make patients comfortable; assist patients in maintaining normal body functions; observe signs, symptoms, and changes in condition of patients; perform procedures that meet the patients' needs for treatment and diagnosis; report signs, symptoms, and conditions such as recording vital signs and observations of physical behavior and condition and report any unusual or sudden change to a professional nurse or physician (Wisconsin Board of Vocational, Technical and Adult Education:1979:HO-13).

Before the nursing graduate may function as a registered nurse, the graduate must pass the WSBTP Exam. Administration of this exam and the licensing of graduates is within the jurisdiction of the Wisconsin State Board of Nursing (Nursing Board). Because of their jurisdiction, program standards and requirements are also set by the nursing board. One of these is that of evaluation of the curriculum (see Appendix C).

The WSBTP Exam is one component of curriculum evaluation. However, the written instrument is designed to obtain an assessment of theoretical background of the graduate. It addresses primarily the Sanders' Cognitive Domain categories of "knowledge, translation, interpretation, application, and analysis (Sanders:1966:5)."

Statement of the Problem

The Lakeshore VTAE District did not have information regarding the nursing functions level of preparedness of its recent ADN graduates. This information was necessary to determine the effectiveness of the curriculum and instructional methodologies utilized within the current ADN program and to provide a basis for modifications and/or revisions. The information was also requested by the Wisconsin State Board of Nursing as part of the requirements within the ADN Program Approval process.

Purpose of the Study

The purposes of the study were:

1. To obtain information regarding the effectiveness of the ADN program in preparing graduates to function within the facilities and in situations for which they had been trained. The results of the study will be used as a basis for making decisions regarding modifications and/or revisions of curriculum and instructional methodologies.

2. To obtain information regarding the similarity of responses of employers and graduates in assessing the preparedness levels of the graduates for each of the thirty-nine nursing functions. The results will be used as a basis for making decisions regarding the collection of data from employers and graduates for rating preparedness levels of graduates.

Research Questions

The following research questions were addressed in the study:

1. Are all the LTI ADN graduates' nursing functions preparedness levels adequate for functioning as an ADN in clinics, hospitals, and nursing homes?

2. Is there a significant difference between the assessment of ADN graduates' nursing functions preparedness levels as expressed by employers and the assessments of ADN graduates' nursing functions preparedness levels as expressed by graduates?

Research Hypotheses

This study was conducted to determine the effectiveness of the ADN curriculum content and instructional methodologies in preparing ADN graduates. The research hypotheses developed for this study were as follows:

1. Each of the ADN graduates' nursing competency preparedness levels is adequate, for functioning as an ADN in clinics, hospitals, and nursing homes, as expressed by employers and graduates.

2. There is a significant difference between the mean of each of the ADN graduates' nursing competency preparedness levels as expressed by employers and the mean of each of the ADN graduates' nursing competency preparedness levels as expressed by graduates themselves.

BACKGROUND AND SIGNIFICANCE

Lakeshore Technical Institute (LTI) is an institution offering less-than-one-year, one-year, and two-year vocational diploma and two-year associate degree education in the state of Wisconsin. It is a public institution financed with federal, state, and local funds in addition to student tuition and material fee payments.

The institution offers a variety of programs in various occupational fields. These fields include:

1. Agriculture.
2. Business administration.

3. Health.
4. Home economics.
5. Public services.
6. Trade and industry.

These programs are offered on a full-time basis, part-time basis, or both.

Nursing Technical is an associate degree program offered at LTI which leads to the registered nurse designation. This is more commonly referred to throughout the United States as the Associate Degree Nursing program to differentiate it from three-year diploma and four-year baccalaureate programs which also lead to the same registered nurse designation. The program is offered on a full-time, two-year schedule for most students and on a part-time, three-year schedule for students already possessing the Licensed Practical Nurse designation having a three-year, part-time option.

Approval for offering the ADN program was obtained from both the Wisconsin Board of Vocational, Technical and Adult Education and the Wisconsin State Board of Nursing. Approval from the Wisconsin Board of Vocational, Technical and Adult Education (WBVTAE) was needed because LTI is a district within the VTAE system; and approval from the Wisconsin State Board of Nursing was needed because of the licensing of nurses, without which the graduate cannot legally function in the registered nurse role, is within its jurisdiction. Both agencies require program evaluations, although specific evaluation procedures are not enumerated by either agency.

REVIEW OF RELATED LITERATURE

Because LTI is a publicly supported institution, it is accountable to the public and to the graduates. A considerable effort must be expended to ensure that the training program is effective and efficient in providing a trained work force.

The importance of developing an educated work force should not be taken lightly, while it would be naive to think that employer satisfaction research will prevent productivity problems, it is reasonable to think that such research could be beneficial (Asche and Vogler:1980:16).

The LTI Associate Degree Nursing program also has a program advisory committee to provide input for determining the direction of emphasis for the program. This committee is composed of employees (graduates), employers (administrators of clinics, hospitals, and nursing homes), nursing supervisors, physicians, and representatives from four-year nursing program institutions and ADN students. The functions and roles of a program advisory committee are described in an Advisory Committee Handbook published by the district (see Appendix D). Included is advice regarding content (knowledge and competencies) and nursing care approach to be emphasized.

The ADN curriculum had been developed in accordance with current curriculum development philosophy and practices being based on identified ADN nursing functions and behavioral/measurable objectives.

"Dr. Lessinger (former assistant U.S. Office of Education commissioner) insisted that general goals be translated into specific behavioral objectives (Robertson:1971:10)." The LTI program has program competencies; level objectives; and specific, measurable behavioral objectives for each of the individual courses.

One of the most important components of a vocational education institution's program is its system for evaluation of the occupational program. There are a number of definitions and descriptions of evaluation, each with its own implications for its administration. After reviewing a number of them, Wentling and Lawson concluded:

The most popular is one which considers the evaluation in light of decision-making process stated by the Phi Delta Kappa Commission on Evaluation: Evaluation is the process of delineating, collecting, and providing information useful for judging decision alternatives (Stufflebeam, et al, 1971)--evaluation for decision-making necessitates close communication and a working link between evaluator and decision maker to ensure relevance of provided evaluation (Wentling and Lawson:1975:13).

Others have also described the importance of evaluation. Popham states, "Evaluation is concerned with judgments of merit or worth (Popham:1974:150)." Spierer also states, "Finally, evaluation is a management tool. It provides a basis for making program decisions and for responding to needed changes (Spierer:1980:10)."

Programs in public vocational education are increasingly being scrutinized to determine their effectiveness. Increases in funding levels and concern for tax rates have made people even more concerned about the accountability factor in education during recent years as indicated in the following quotes.

Demands for educational accountability have been growing (Robertson:1971:8).

Today the public education system is experiencing the most prolonged and profound challenge ever to confront it. Current national conditions have created forces that virtually demand an application of accountability to education (Roueche and Herscher:1973:203).

Meanwhile most state governments are more concerned than ever before about showing the worth of educational and training endeavors. Also of great importance is the taxpaying public which supports public education, and the students of educational programs are questioning the relevance and general worth of occupational programs (Wentling and Lawson:1975:18).

In a more recent publication, Wentling has included the importance of evaluation in accountability as well.

Tim Wentling (Evaluating Occupational Education in Training Programs, second edition, 1980) defines evaluation as the collection of information and judgments to facilitate planning, to aid in the improvement of programs, and to meet accountability (Warmbrod and Persavich:1981:1).

The importance of evaluation in public institution accountability and program improvement is indicated further.

Wentling (1980) further identifies five outcomes of evaluation that are significant to the postsecondary institution; they are, planning, decision making, professional development, program improvement, and accountability--

5. Accountability

Both the private and public sectors demand evidence that current educational programming outcomes are worth their investment--educational accountability requires a presentation of program results (e.g., placement of students in jobs, achievement scores)--in relation to incurred costs and established objectives. From an internal perspective, these accountability measures can aid program managers and administrators by helping to justify their decisions regarding expansion, deletion, or revision of existing programs. A well-conceived evaluation program or system within an educational or training institution helps meet this accountability requirement (Warmbrod and Persavich:1981:1-3).

Franchak also provides the rationale for vocational program evaluation at the local level.

Vocational educators at the state and local levels are under increasing pressure to plan and conduct meaningful and useful evaluations. Since the passage of the 1963 Vocational Education Act, increased effort has been expended to determining the quality of vocational education programs. For the purposes of this handbook, quality is comprised of three factors.

1. Effectiveness: Does the vocational program enable students to--

- a. meet program objectives, and
- b. perform satisfactorily on the job?

2. Efficiency: Doing things in the most cost-effective manner. Is there an apparent waste in the vocational program of student time, instructional time, materials and equipment, and use of facilities?

3. Relevance: Are the knowledge and skills learned in the program--

- a. performed on the job,
- b. critical to job success, and
- c. consistent with on-the-job practices (Franchak:1981:5)?

Airasian also indicates the diverse reasons for evaluation, one of which is accountability.

"At the local level, the demand for summative evaluation studies to assess the outcome of programs, policies, or practices arises from many sources. In cases where governmental funding provides the basis for support, the granting of funds is often contingent upon evaluation (Popham:1974:152)."

Because the LTI ADN program has been developed to include specific measurable competencies and objectives, evaluation is considerably enhanced. These are considered essential in an evaluation of the program because they serve as standards for comparison. "Evaluation emphasizes goals, objectives, and outcomes (Popham:1974:153)." It is about these specifics that data can be collected and decisions made.

In "Toward Instructional Accountability," contributor Garth Sorenson reiterates the importance of defining expected performance outcomes in measurable terms. She lists it as the second of eight principles to be observed.

Principle 2. For any instructional program it's essential that the goals of the program--whether they involve knowledge, feelings, or attitudes--be defined in terms of performance, behavior, or actions (Rouesche and Herscher:1973:159).

Although there was considerable input into the development and selection of content and instructional methodologies utilized within the LTI ADN program, the evidence for determining the program effectiveness can only be obtained through evaluation of the graduates. These evaluation results can be used to provide a basis for increasing program effectiveness. As Wambrod and Persavich put it, "Evaluation of educational programs is essential to determine its worth and to provide for its continued improvement and effectiveness (Wambrod and Persavich:1981:1)."

Both theory and performance preparation levels need to be evaluated. While the Wisconsin State Board Test Pool Exam can be used to evaluate the theory preparation of graduates, additional measures are needed to evaluate the graduates' nursing competencies. The value of follow-up studies of graduates in this is further emphasized by Wentling and Lawson.

Follow-up studies are designed to evaluate the product of career programs--the graduate. The primary goal of such education, the preparation of individuals for employment, can best be assessed by examining the placement record of graduates in gathering job performance data from employers. In addition, very important information regarding the strengths and weaknesses of a program may be gathered from former students who are in the best position to judge such characteristics (Wentling and Lawson:1975:124).

Baratta further enumerates the objectives of follow-up studies.

According to her, these objectives include:

- A. Human relations abilities, communication skills, problem-solving skills, technical skills, and life skills to function effectively in his/her present position.
- B. To determine quality and quantity of work by graduate.
- C. To determine suitability of graduates for jobs.
- D. To determine strengths and weaknesses in the occupational program.
- E. To determine the relationship of (graduates') achievement to employer evaluation (Baratta:1977:6).

In addition to the above reasons for conducting a follow-up study regarding an occupational program, there is also the legal responsibility for each postsecondary institution to do so. Bers emphasizes this fact in his statement:

A recent statute, Educational Amendments of 1976, has made student follow-up the law of the land. This act requires postsecondary institutions offering occupational programs to begin tracking the career and educational progress of their occupational students effective July, 1979 (Bers:1980:6).

The evaluation study does not have to involve a pretest because, in this particular program, few, if any, of the functions would have been a part of the students' experience prior to entering the program. This

was supported with the statement by Fitz-Gibbon and Morris, "Don't pretest when using one would be meaningless (Fitz-Gibbon and Morris:1978:41)."

Employer and graduate follow-up surveys are often used to obtain data for program evaluations. The literature basis for the employer approach used follows.

Robert E. Taylor, executive director, The National Center for Research in Vocational Education, wrote in the foreword of Assessing Employer Satisfaction with Vocational Education Graduates:

Employer satisfaction with vocational education graduates is a primary goal of the vocational education system. Employer surveys, therefore, are important to vocational educators as a means of determining the success of their programs (Asche and Vogler:1980:v).

While evaluation using employer follow-up studies appears to be valuable, "little has been reported in the literature (Asche and Vogler:1980:2)" regarding their generalized potential value. Employer studies conducted over the past few years have been designed to suit the needs of the institution seeking the data. A recent study done at the Virginia Polytechnic Institute does provide insight into the types of follow-up studies quite often conducted and to whom administered.

A classification of the most common data collected in the employer follow-up studies during the period 1970-1977 revealed that almost all of the studies asked the employers (individual supervisors) to rate specific former vocational education students on selected work skills, habits, and attitudes or characteristics (Asche and Vogler:1980:2, 4).

The use and value of follow-up study results have been addressed also. Asche and Vogler suggest its usage. "Such data would appear to have greatest validity when used for formative evaluation (e.g., program improvement) and, to a limited extent, for summative evaluation (Asche and Vogler:1980:2, 4)."

The approaches suggested for use in follow-up studies has also been addressed by them. They indicated that three basic approaches were used.

Most contemporary research on employers' perceptions takes one of three basic approaches:

- Asking employer/supervisor questions about specific employees who are graduates of or have received vocational training.
- Asking employers or supervisors who have hired graduates of a particular school or program questions about vocational graduates as a group.
- Sampling employers in an area and asking questions about vocational education or its graduates. In this type of study, employers have been selected according to some rationale other than prior knowledge that they employ persons with vocational training (Asche and Vogler:1980:4).

Employer satisfaction with the training program and the performance of the graduates on the job is somewhat difficult to obtain as each employer has different expectations and bases for the evaluation. However, one way to evaluate the program is to evaluate the results; the performance of the graduate on the job. Asche and Vogler state:

The specification of what is meant by employer satisfaction presents difficulties to the potential researcher. One approach to defining employers' satisfaction with vocational education graduates, therefore, involves the assessment of the satisfactoriness of vocational graduates as employees.

The most common approach taken by vocational education researchers, however, appears to be simple generic rating of workers who have had vocational education, . . . The approach being taken under the Vocational Education Data System (VEDS), for example, has the employer rate the training of the individuals per se. Such a stance is based on the assumption of a causative relationship between employees' performance and their vocational training (Asche and Vogler:1980:5, 6).

Work by Snyder also supports the use of supervisors in follow-up studies for the most accurate assessment of the graduates' training.

The satisfaction expressed by employers will depend on the amount of contact with and the responsibility for the employee. The line of supervisor's ratings will differ from the personnel director's ratings and from the central administration's ratings. One study (Snyder, 1972) found considerable variance between the supervisor's and the personnel director's ratings of former vocational students.

It may be reasoned that most of the variance is due to the amount of information available and the perspective of the rates (Asche and Vogler:1980:12).

The employers selected for follow-up studies should be those having had direct contact with the graduates as employees. "Surveys of knowledgeable individuals have been found to be a reliable criterion for ranking academic programs (Margulies and Blau:1973:25)." The reason for this is clearly understood and simply stated by Franchak.

If a particular program is in need of information on satisfaction measurements, then the question of which to include is easily answered by selecting employers who are known to have hired graduates--data from employers who are aware that their firms will ultimately benefit from the evaluation research effort will more than likely provide the evaluation agency with accurate employer satisfaction information (Franchak:1981:12).

Those persons selected to be employer respondents should have had immediate contact with the graduate in a supervisory capacity. One would then expect more valid data and a better response rate. After reviewing a number of studies, Asche and Vogler concluded, "In contrast to the situation with general employer surveys, response rates from immediate supervisors asked to rate specific former vocational students are typically 70-80 percent (Asche and Vogler:1980:9)."

The literature also indicates that graduates should also be surveyed because they should be in one of the best positions to judge the program's effectiveness. There may be some concern that graduates (former students) may not be in a position to judge the level of nursing competencies preparedness required to adequately function because of the lack of experience in how nursing competencies should be performed in a health care facility. As follow-up studies are designed to evaluate the program's product, the graduate, it seems imperative that an indication of the preparedness level of the graduate be obtained.

The primary goal of such (occupational) education, the preparation of individuals for employment, can best be assessed by examining the placement records of graduates and gathering job information from employers. In addition, very important information regarding strengths and weaknesses of a program may be gathered from former students who are in the best position to judge such characteristics--usually former learners are interested in expressing their feelings about how well their educational experiences have helped them in their subsequent employment. Learners often indicate certain job tasks which they have found to be most difficult in their employment. This information can help the educator or training director to revise or expand instruction in specific areas (Wentling and Lawson:1975:124, 126).

The follow-up studies may also be categorized according to the way in which the respondents are contacted. Asche and Vogler reviewed three types: the mailed, the telephone, and the personal interview. They state results of their reviews along with a caution:

The mailed questionnaire is the most common type of survey used, although the telephone and personal interviews have also been utilized. There is some question as to whether the most common survey techniques are also the most effective, as many of the considered had low response rates. Return rates have typically been low (often less than 20% and in one case only 8%) . . . The representativeness of data derived from a self-selected minority of employers is suspect at best. A preferred approach would be to use more intensive follow-through procedures to maximize return rates (Asche and Vogler:1980:8).

A number of others also reported utilizing the mail-type survey and supplementing the first mailings with subsequent mailings and/or telephone contacts. Increases in response rates were noted. Included in this group were: Baratta (1977, 1978); Bers (1980); Harris (1978); Kirby (1978); Morton (1977); Prindeville (1975); and West (1978).

The researcher is often torn between anonymity of respondents and a good response rate. Responding to concerns such as expressed by Asche and Vogler previously has led many evaluation researchers to become less concerned with the bias that might result from respondents suspecting, or knowing, that their anonymity has not been preserved than the bias or

criticism resulting from a small response rate. Therefore, follow-up of nonresponders becomes very important.

Although almost all follow-up questionnaires promise anonymity, the extent to which recipients of the questionnaires believe that anonymity actually exists is unclear. Probably lack of faith in the condition of total anonymity is more universal than faith in its existence. Thus, to some degree, such questionnaires represent a threat to most recipients, especially when opinions or judgments are sought; and this threat may affect individuals in various ways--- That raises the possibility of nonresponse bias in the data collected. Since the judgments or opinions of those individuals who do not respond may be quite different from the opinions of those who do. The evaluator is then caught in a dilemma. To use the data as collected may be to misrepresent the situation, but to contact nonrespondents in an effort to collect data may increase their feelings of being threatened or may reinforce the belief that anonymity does not really exist. However, it is generally agreed that it is better to attempt to collect data from nonrespondents and to determine the extent of nonresponse bias, if it exists (Ponce and Franchak:1981: 11).

The training effectiveness instrument was developed by the ADN program staff and the curriculum specialist. The competencies identified for inclusion were those considered most important for performance as a nurse. This was in accordance with readings from the literature typified by the following:

Guidelines for collecting such information (regarding the training) include the following: Only those data directly related to stated objectives of the evaluation should be collected; the information should be collected as opinions or judgments and treated as such (Ponce and Franchak:1981:14).

Response choices should be relatively easy to select in accordance with the supervisor's judgment based on observations of the graduate from a supervisory perspective and the job requirement or from the graduate perspective in actual job performance. The Center for Vocational Education at Ohio State emphasizes this in its 1980 publication:

The terms used in the format of the questions asked should be easily understood by the employer---a fairly common problem has been the provision of response alternatives which do not appear to be at equal intervals and the mixing of what appears to be 'criterion' and 'norm' referenced options. Such questions can be confusing to

employers and can reduce response rate and data reliability (Asche and Vogler:1980:9).

SIGNIFICANCE

The results of this study were helpful to the Lakeshore Technical Institute ADN program advisory committee members and staff in determining whether the ADN program (content and instructional methodologies) was fulfilling its goal of providing a competent technical nurse practitioner upon graduation. The results provided information regarding levels of preparedness useful as a basis for future reviews and recommendations regarding program content and instructional methodologies. The information provided a basis for decisions regarding the priority of proposed recommendations.

The comparison between employers' responses and graduates' responses provided LTI management and research personnel with an information basis for making decisions regarding groups to be surveyed in future program evaluations.

The results of the study were also forwarded to the Wisconsin State Board of Nursing. The board accepted the study results and was a major factor in the decision to continue its approval of the program. The board made the request that LTI conduct a similar study of its 1983 graduates to fulfill the requirements included in their ADN program approval process.

The study of the levels of LTI ADN program graduates' nursing competencies preparedness was appropriate for the seminar "Curriculum and Program Planning" because of the emphasis on specific, measurable objectives and functions (competencies) and on evaluation based on the specified objectives for use in decision making. The use of evaluation

results in systematic curriculum development and revision was an important component of the seminar.

DEFINITION OF TERMS

For the purpose of this study, the following definitions were used.

Behavioral Objective - Statement of a specific measurable outcome of instruction; includes knowledge, attitudes, and skills.

Competency - The statement designating the "tasks, skills, attitudes, values, and appreciations that are being critical to successful employment (Finch and Crunkilton:1979:220)."

Curriculum - The organized sum of content, information, and experiences designed to provide the student with specific occupational competencies.

Educational Accountability - A way of providing information to the public regarding learning outcomes (competencies) resulting from given facilities, funding, and staff.

Employer - The clinic, hospital, or nursing home facility employing the graduate.

Evaluation - The measurement of the level of achievement of functions or objectives by the graduate of the program.

Follow-up Study - Study conducted after graduation to determine certain characteristics; i.e., employment status, salaries, training effectiveness, etc.

Four-year Baccalaureate Nursing Program - A four-year Wisconsin State Board of Nursing approved academic nursing program culminating

with a B.S. in nursing. Graduates are eligible to complete the Wisconsin State Board Test Pool Exam.

Function - Used synonymously with competency in this study because of familiarity with use of term in the nursing field (see competency).

Lakeshore Vocational, Technical and Adult Education (VTAE) District - One of sixteen geographic districts within the Wisconsin VTAE system. Its boundary includes the boundaries of eighteen public high school districts.

Level Objective - One of a number of general learning outcomes statements for each of the two years of the nursing program. Each year consists of approximately thirty-two credits.

Nursing Function - One of a number of specialized skills that technical level trained registered nurses should possess upon initial employment.

Nursing Technical (ADN) Program - A two-year Wisconsin State Board of Nursing approved technical level program containing sixty-eight credits and culminating in an Associate Degree in Science.

Preparedness Level - The level of graduate's achievement of functions. The levels used in the study were "poorly prepared," "moderately prepared," and "well prepared."

Program Advisory Committee - A committee appointed from the local citizenry, business, industry, professions, and organizations that are knowledgeable in the areas for which they have been appointed to provide advice to the program staff. "Advisory committees represent employees and employers. Advisory committees relating to vocational, technical,

and adult education are authorized by the Wisconsin Statutes, Chapter 38.14(5) (Lakeshore Technical Institute:1978:11)."

Program Function - One of a group of ADN program nursing skills considered to be essential to the role as an entry-level registered nurse.

Registered Nurse - A nurse who has satisfactorily completed the Wisconsin State Board Test Pool Exam and received a license to practice from the Wisconsin State Board of Nursing.

Nursing Supervisor - The nurse on the facility's unit having the responsibility to direct the functions of the ADN graduate.

Three-year Diploma Nursing Program - A three-year vocational-level program approved by the Wisconsin State Board of Nursing designed to prepare graduates for the position of registered nurse.

Training Effectiveness - A measure of the graduates' level of preparedness of a program in an effort to determine the effectiveness of content presented and instructional activities (laboratory and clinical) in student learning.

Wisconsin Board of Vocational, Technical and Adult Education (WBVTAE) - The governmental body having the legislated mission of providing vocational, technical, and adult education within the state of Wisconsin.

Wisconsin State Board of Nursing - The governmental body given the legislated responsibility for licensing and monitoring nurses and nursing education programs within the state of Wisconsin.

Wisconsin State Board Test Pool Exam - The exam administered by the Wisconsin State Board of Nursing and completed by associate degree three-year diploma, and baccalaureate degree graduates. A passing score

is required to practice as a registered nurse within the state of Wisconsin.

LIMITATIONS OF THE STUDY

The employer representative responding to the survey was the nursing supervisor of the graduates. No training was given in the use of the level of preparedness scale. Although the direct supervision was constant, expectations could vary from supervisor to supervisor.

The graduates responding received no training in the use of the level of preparedness scale. Therefore, variations could be attributed to variations of the individual expectations.

The functions were developed with input from staff and advisory committee members. However, individual respondents' interpretations of the functions might vary.

ASSUMPTIONS OF THE STUDY

The following assumptions were made concerning this study:

1. It was assumed the direct nursing supervisor could best respond for the facility regarding the preparedness level of the graduate after initial employment.
2. It was assumed that the nursing supervisor and the graduate could accurately assess the graduate's initial level of preparedness, using the instrument rating scale provided, even though six or more months had passed since initial employment.
3. It was assumed that the graduates were assigned to the type of patient situations for which they were trained.

PROCEDURE FOR COLLECTING THE DATA

The procedure used in this study included the following:

1. A review of the literature pertaining to the topic of evaluation of vocational education programs was made. The literature was identified through an Educational Resources Information Center (ERIC) search, which identified both Research in Education (RIE) titles and Current Journals in Education (CJIE) titles. Additional resources were identified through local institutional sources and through University of Wisconsin-Madison sources.

2. The study included all 1982 LTI ADN program graduates receiving the registered nurse (RN) designation and the employers of those graduates. The graduates were identified on the 1982 graduation list and the results of the Wisconsin State Test Pool Exam list. The employers were health care facilities employing graduates for initial employment as a registered nurse. The names of the employers were obtained from the results of the 1982 LTI Six-month Follow-up Study completed by the LTI Placement Office and by mail contact with those graduates responding "Not Employed" on the follow-up survey form to determine if their employment status had changed. Forty-five graduates and supervisors of forty-three graduates were included. Two graduates were not employed.

3. The training effectiveness instrument, containing instructions, functions (competencies), and response choices, was developed by the investigator and members of the ADN program staff. The functions (competencies) identified for inclusion were those considered most important for performance as a nurse. The functions were grouped into the following categories: category assessment, planning, implementing,

evaluation, communication, interpersonal relationships, and role as a health team member.

Both employer and graduate forms had three identical response choices so that comparisons could be made. A "norm" referenced scale was used. The response choices were: 1--Poorly Prepared, 2--Moderately Prepared, and 3--Well Prepared. In addition, the employer form had a fourth choice, 0--Not Applicable, for use if the graduate was not observed or required to perform the function. The "0" response was not included in the calculations used to test the hypotheses.

4. The validity and reliability of the training effectiveness instrument was addressed by submitting the instrument to the program advisory committee members, program staff members, and a group of second-year students. The instrument was modified in accordance with their suggestions. Sample instruments are included as Appendices E and F.

5. A mail-type survey was utilized in the study. An envelope containing the training effectiveness instrument and a letter to the graduate's supervisor was mailed to the director of nurses of each health care facility employing a graduate. Accompanying the envelope was an information letter (see Appendix G) indicating the purpose and importance of the study and the request that the envelope be forwarded to the supervisor of the graduate listed on the instrument. The cover letter (see Appendix H) to the supervisor indicated the importance of the study, and his/her response by a specified date was included. A postage-paid envelope was also included with each instrument sent to the facility.

6. A cover letter (see Appendix I) and the training effectiveness instrument were sent to each ADN graduate included in the study. The letter indicated the importance of the study and of his/her

response by a specified date. A postage-paid return envelope was also included for the graduate's convenience.

7. Follow-up of nonresponder facilities was accomplished by telephone contact. The director of nursing of facilities in which supervisors had not responded was contacted after the return due date to reiterate the importance of the supervisor(s)' response. A replacement instrument was sent if the original one was misplaced.

8. Follow-up of nonresponder graduates was accomplished by a letter sent after the return due date (see Appendix J). Graduates were reminded of the importance of their responses in maintaining the program's effectiveness.

PROCEDURE FOR TREATMENT OF THE DATA

The data were sent to Nova University for submission for discriminant function analysis because the Statistical Program for Social Science (SPSS) computer program and appropriate staff were available. The following analyses were obtained:

1. The mean and standard deviation for the composite of the employer and graduate responses for each function.
2. The mean and standard deviation for the employer responses for each function.
3. The mean and standard deviation for the graduate responses for each function.
4. The calculated composite mean value selected for acceptance of the adequacy of each function was 2.00 based on a 3.00 scale. If the calculated composite mean value for a function was less than 2.00, the

adequacy level of preparedness would be judged as a nonacceptable and the instruction regarding the function reviewed.

5. The discriminant function analysis produced the t-value and level of significance between the mean and standard deviation of the employers' responses and the mean and standard deviation of the graduates' responses for each function.

6. The critical t-values were determined from a chart of critical t-values for a two-tailed test at the .05 level of significance selected with the degrees of freedom in accordance with the number of respondents in each group.

HYPOTHESES

In order to complete this study, the following hypotheses were developed:

Null Hypothesis 1

The preparedness level of the ADN graduates for each of the thirty-nine nursing functions is at least at the "moderately-prepared" level as expressed by the mean of the composite of responses of employers and graduates. $H_{01} : \bar{X} \geq 2.00$ for each of the thirty-nine functions.

Alternate Hypothesis 1

The preparedness level of the ADN graduates for one or more of the thirty-nine nursing functions is less than the "moderately-prepared" level as expressed by the mean of the composite of responses of employers and graduates. $H_{A1} : \bar{X} < 2.00$ for one or more of the thirty-nine functions.

Null Hypothesis 2

There is no significant difference between the mean preparedness level of each nursing function as expressed by employers and the mean preparedness level of each nursing function as expressed by graduates.

$H_{02} : \bar{X}_1 = \bar{X}_2$ for each of the thirty-nine functions.

Alternative Hypothesis 2

There is a significant difference between the mean preparedness level of each nursing function as expressed by employers and the mean preparedness level of each nursing function as expressed by graduates.

$H_{A2} : \bar{X}_1 \neq \bar{X}_2$ for one or more of the thirty-nine functions.

Statistical Tests

The calculated mean of the composite of the responses of the employers and the graduates for each function was used to test Null Hypothesis 1. The decision to reject or fail to reject Null Hypothesis 1 was made on the basis that all the means of the responses for the thirty-nine functions were either equal to or greater than 2.00 or less than 2.00.

To test Null Hypothesis 2, the discriminant function analysis was used to obtain the t-value and two-tailed probability to determine the significance between the mean and standard deviation of the responses of employers and the mean and standard deviation of the responses of graduates for each of the thirty-nine functions. The decision to reject or fail to reject Null Hypothesis 2 was made at the .05 level of significance for a two-tailed test.

RESULTS

The study produced results in a number of areas. These are included as follows.

Eighty-eight surveys were distributed. Forty-three were sent to employers of graduates, and forty-five were sent to graduates. A total of seventy-three (83 percent) responses were received from both employers and graduates. Thirty-seven (86 percent) responses were received from employers of graduates. Thirty-six (80 percent) responses were received from graduates.

The data were submitted to a discriminant function analysis. The means and standard deviations were calculated for the responses for each of the thirty-nine functions. The means and standard deviations for (1) the composite of the employers' and graduates' responses, (2) the employers' responses, and (3) the graduates' responses were obtained for each function.

The functions were ranked according to the means and standard deviations for the composite responses of employers and graduates with the function having the greatest mean listed as number one and the function having the smallest mean listed as number thirty-nine. These are included in Table 1 with the identification number of each. The function statements are found in Appendix E.

Table 1

Ranking* of Functions Based on Means and Standard Deviations
of Composite of Employers and Graduates' Responses

Rank	Function Number	$\bar{X}$	sd
1	17	3.00	.00
2	12	2.97	.18
3	4	2.96	.20
4	16	2.94	.23
5	13	2.94	.24
6	15	2.93	.26
7	18	2.90	.30
8	14	2.87	.34
9	19	2.80	.40
10	22	2.72	.48
11	5	2.71	.46
12	1	2.68	.50
13	2	2.67	.47
14	26	2.65	.51
15	3	2.62	.49
16	36	2.60	.48
17	9	2.59	.50
18	7	2.59	.52
19	29	2.58	.55
20	6	2.55	.53
21	8	2.54	.53
22	30	2.54	.56
23	37	2.54	.58
24	33	2.58	.61
25	27	2.51	.53
26	32	2.51	.61
27	28	2.49	.50
28	38	2.47	.55
29.5	10	2.46	.58
29.5	11	2.46	.58
31	31	2.45	.50
32	35	2.44	.58
33	34	2.39	.59
34	25	2.39	.62
35	23	2.39	.65
36	21	2.31	.73
37	24	2.27	.73
38	20	2.17	.74
39	39	2.10	.72

*Ranked with largest mean as number 1

Response choices of (1) "poorly prepared," 1.00; (2) "moderately prepared," 2.00; or (3) "well prepared" were possible for each function. Twenty-six (67 percent) functions had calculated composite means equal to or greater than 2.51 (well prepared) with one function, number seventeen, "Feed or assist with feeding," having a mean of 3.00. Thirteen functions had calculated composite means between 2.00 and 2.50 within the moderately-prepared range. No function had a calculated composite mean less than 2.00. Therefore, Null Hypothesis 1, **"The preparedness level of the ADN graduates for each of the thirty-nine nursing functions is at least at the 'moderately-prepared' level as expressed by the mean of the composite of responses of employers and graduates,"** cannot be rejected.

The calculated mean and standard deviation for employer responses for each function was compared to the calculated mean and standard deviation for graduate responses for each function using the discriminate function analysis. The t-value and two-tail probability were also obtained for each function from the discriminant function analysis print-out.

Table 2 contains the functions ranked according to the two-tail probability with the function having the smallest probability (0.000) and the greatest absolute t-value (4.30) given the rank of one. The function having the greatest probability (1.000) and smallest absolute t-value (0.00) was given a rank of thirty-nine.

Table 2

Ranking of Functions by Probability of Difference Between
Means and Standard Deviations of Employer Responses
and of Graduate Responses

Rank*	Function Number	Group 1 (Employers) N = 37		Group 2 (Graduates) N = 36		t-Value**	Two-tail Probability
		$\bar{X}$	sd	$\bar{X}$	sd		
1	7	2.34	.54	2.83	.38	-4.30	.000
2	32	2.25	.65	2.77	.43	-3.99	.000
3	9	2.39	.49	2.80	.41	-3.74	.000
4.5	1	2.49	.56	2.89	.32	-3.65	.001
4.5	28	2.29	.46	2.69	.47	-3.65	.001
6	27	2.31	.47	2.71	.52	-3.38	.002
7	8	2.33	.48	2.74	.51	-3.35	.002
8	6	2.36	.54	2.74	.44	-3.21	.003
9	3	2.47	.51	2.77	.43	-2.74	.009
10	34	2.22	.63	2.57	.50	-2.61	.011
11	39	2.35	.49	1.91	.82	2.54	.014
12	11	2.29	.52	2.63	.60	-2.47	.015
13	2	2.54	.51	2.80	.41	-2.37	.021
14	10	2.31	.58	2.63	.55	-2.32	.024
15	35	2.30	.62	2.60	.50	-2.24	.028
16	30	2.41	.60	2.69	.47	-2.21	.031
17	37	2.40	.65	2.69	.47	-2.16	.035
18	29	2.46	.61	2.71	.46	-1.98	.051
19	24	2.45	.57	2.11	.83	1.93	.058
20	36	2.56	.50	2.77	.43	-1.92	.060
21	4	2.92	.28	3.00	.00	-1.79	.083
22	12	2.92	.27	3.00	.00	-1.46	.148
23	25	2.50	.56	2.29	.67	1.38	.179
24	18	2.94	.24	2.85	.36	1.16	.247
25	5	2.65	.48	2.77	.43	-1.14	.253
26	19	2.75	.44	2.86	.36	-1.10	.299
27	14	2.91	.28	2.82	.39	1.05	.299
28	20	2.07	.78	2.26	.70	-1.02	.313
29	23	2.47	.57	2.31	.72	1.01	.318
30.5	13	2.97	.17	2.91	.29	0.95	.347
30.5	21	2.40	.67	2.23	.77	0.95	.347
32.5	22	2.68	.47	2.77	.49	-0.76	.443
32.5	33	2.49	.70	2.60	.50	-0.76	.443
34	26	2.69	.47	2.60	.55	0.73	.469

Table 2 (continued)

Rank*	Function Number	Group 1 (Employers) N = 37		Group 2 (Graduates) N = 36		t-Value**	Two-Tail Probability
		$\bar{X}$	sd	$\bar{X}$	sd		
35	15	2.94	.23	2.91	.29	0.42	.652
36	31	2.44	.50	2.46	.51	-0.16	.866
37	38	2.41	.56	2.43	.56	-0.15	.874
38.5	16	2.94	.23	2.94	.24	0.00	1.000
38.5	17	3.00	.00	3.00	.00	0.00	1.000

*Ranked with function having largest absolute t-value and smallest probability as #1

**No sign indicates mean of employers' responses was greater than mean of graduates' responses; minus sign (-) indicates mean of graduates' responses was greater than mean of employers' responses

Seventeen (44 percent) functions had a probability equal to or less than the 0.05 level selected as the level of significance. This indicates that there was a significant difference between the responses of employers and the responses of graduates for those functions. Therefore, Null Hypothesis 2, **"There is no significant difference between the mean preparedness level of each nursing function as expressed by employers and the mean preparedness level of each nursing function as expressed by graduates,"** was rejected and Alternate Hypothesis 2, **"There is a significant difference between the mean preparedness level of each nursing function as expressed by employers and the mean preparedness level of each nursing function as expressed by graduates,"** was accepted. The mean of the graduates' responses was greater for sixteen of the seventeen functions for which there was a significant difference. Those functions

for which the mean of the graduates' responses was significantly greater than the mean of the employers' responses were:

7. Identify specific approaches to meet clients' needs.
32. Utilize therapeutic communications skills with client.
9. Develop nursing care plan which incorporates suggestions from other personnel.
1. Identify physiological, emotional, sociological, and spiritual needs of clients.
28. Make modifications in the nursing care plan based on the evaluation.
27. Evaluate outcomes of care according to the formulated objectives.
8. Develop nursing care plan which incorporates client and client's family.
6. Formulate objectives for nursing action.
3. Gather and organize data relevant to client's problem.
34. Identify barriers to communication between me and the client; other staff members.
11. Discuss nursing care plan with nurse(s) in charge.
2. Identify deviation from normal behavior or functional sign.
10. Develop nursing care plans which incorporate suggestions from other personnel.
35. Utilize effective methods to facilitate communication with clients; other staff members.
30. Identify and interpret the verbal and nonverbal communication of client.

37. Interact instructively with other members of the health care team as client advocate.

Only one function had a calculated mean and standard deviation of employers' responses significantly greater than the mean and standard deviation of the graduates' responses. That function was number 39, "Participate in a referral process to health/social agencies."

The survey instrument was designed with each function placed into one of seven categories. These categories were:

1. Assessment.
2. Planning.
3. Implementing.
4. Evaluation.
5. Communication.
6. Interpersonal Relationships.
7. Role as Health Team Member.

The functions within each category are listed in Table 3. The number and percent of functions within each category having a significant difference between the mean and standard deviation of the employers' responses and the mean and standard deviation of the graduates' responses is also indicated. The portion of the functions within each category having means of the responses of the two groups that were significantly different ranged from 0 to 100 percent.

Table 4 contains the functions included within the Assessment category. The mean of the composite responses for each of the five functions, numbers 1 through 5, was greater than 2.60. The mean of the composite responses for all five functions was 2.73.

Table 3

Percent of Functions in Each Category With a Significant
Difference Between Mean of Employers' Responses
and Mean of Graduates' Responses

Category	Function Numbers	Number of Functions	Probability Less Than .05	
			Number	Percent
Category Assessment	1-5	5	3	60
Planning	6-11	6	6	100
Implementing	12-26	15	0	0
Evaluation	27-28	2	2	100
Communication	29-32	4	2	50
Interpersonal Relationships	33-35	3	2	67
Role as a Health Team Member	36-39	4	2	50

Table 4

Ranking of Assessment Category Functions According to
Composite Means and Standard Deviations of
Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
3	4	2.92	.28	3.00	.00	2.96	.20
11	5	2.65	.48	2.77	.43	2.71	.46
12	1	2.49	.56	2.89	.32	2.68	.50
13	2	2.54	.51	2.80	.41	2.67	.47
15	3	2.47	.51	2.77	.43	2.62	.49
	Composite of five functions					2.73	

*Based on ranking of all thirty-nine functions

Table 5 contains the functions included within the Planning category. The mean of the composite responses for each of the six functions, numbers 6 through 11, was between 2.46 and 2.59. The mean of the composite responses for all six functions was 2.53.

Table 5
Ranking of Planning Category Functions According to
Composite Means and Standard Deviations of
Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
17	9	2.39	.49	2.80	.41	2.59	.50
18	7	2.34	.54	2.83	.38	2.59	.52
20	6	2.36	.54	2.74	.44	2.55	.53
21	8	2.33	.48	2.74	.51	2.54	.53
29.5	10	2.31	.58	2.63	.55	2.46	.58
29.5	11	2.29	.52	2.63	.60	2.46	.58
Composite of six functions						2.53	

*Based on ranking of all thirty-nine functions

Table 6 contains the functions included within the Implementing category. The mean of the composite responses for each of the six functions, numbers 12 through 26, was between a low of 2.17 to a high of 3.00, with eight of the fifteen functions having a composite mean equal to or greater than 2.80. The mean of the composite responses for all fifteen functions was 2.63.

Table 6
Ranking of Implementing Category Functions According to
Composite Means and Standard Deviations of
Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
1	17	3.00	.00	3.00	.00	3.00	.00
2	12	2.92	.27	3.00	.00	2.97	.18
4	16	2.94	.23	2.44	.24	2.94	.23
5	13	2.97	.17	2.91	.29	2.94	.24
6	15	2.94	.23	2.91	.29	2.93	.26
7	18	2.94	.24	2.85	.36	2.90	.30
8	14	2.91	.28	2.82	.39	2.87	.34
9	19	2.75	.44	2.86	.36	2.80	.40
10	22	2.68	.47	2.77	.49	2.72	.48
14	26	2.69	.47	2.60	.55	2.65	.51
34	25	2.50	.56	2.29	.67	2.39	.62
35	23	2.47	.57	2.31	.72	2.39	.65
36	21	2.40	.67	2.23	.77	2.31	.73
37	24	2.45	.57	2.11	.83	2.27	.73
38	20	2.07	.78	2.26	.70	2.17	.74
Composite of fifteen functions						2.63	

*Based on ranking of all thirty-nine functions

Table 7 contains the functions included within the Evaluation category. The mean of the composite responses for each of the two functions within this category, numbers 27 and 28, were 2.50 plus or minus .01. The mean of the composite responses for both functions was 2.50.

Table 8 contains the functions included within the Communications category. The means of the composite responses for the four functions within this category, numbers 29 through 32, ranged from 2.45 to 2.58. The mean of the composite responses for all four functions was 2.52.

Table 7

Ranking of Evaluation Category Functions According to
Composite Means and Standard Deviations of
Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
25	27	2.31	.47	2.71	.52	2.51	.53
27	28	2.29	.46	2.69	.47	2.49	.50
	Composite of two functions					2.50	

*Based on ranking of all thirty-nine functions

Table 8

Ranking of Communication Category Functions According to
Composite Means and Standard Deviations of
Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
19	29	2.46	.61	2.71	.46	2.58	.55
22	30	2.41	.60	2.69	.47	2.54	.56
26	32	2.25	.65	2.77	.43	2.51	.61
31	31	2.44	.50	2.46	.51	2.45	.50
	Composite of four functions					2.52	

*Based on ranking of all thirty-nine functions

Table 9 contains the functions included within the Interpersonal Relationships category. The means of the composite responses for the three functions within this category, numbers 33 through 35, ranged from 2.39 to 2.58. The mean of the composite responses for all three functions was 2.47.

Table 9
Ranking of Interpersonal Relationships Category Functions
According to Composite Means and Standard Deviations
of Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
24	33	2.49	.70	2.60	.50	2.58	.61
32	35	2.30	.62	2.60	.50	2.44	.58
33	34	2.22	.63	2.57	.50	2.39	.59
	Composite of three functions					2.47	

*Based on ranking of all thirty-nine functions

Table 10 contains the functions included within the Role as Health Team Member category. The composite means of three of the functions within this category, numbers 36 through 38, were 2.47, 2.54, and 2.60 respectively. The composite mean of the other function, number 39, was considerably lower at 2.10 which was also the lowest mean in all categories. The mean of the composite responses for all four functions was 2.43.

Table 10

Ranking of Role as Health Team Member Category Functions
According to Composite Means and Standard Deviations
of Employers' and Graduates' Responses

Rank*	Function Number	Employers' Responses		Graduates' Responses		Composite of Responses	
		$\bar{X}$	sd	$\bar{X}$	sd	$\bar{X}$	sd
16	36	2.56	.50	2.77	.43	2.60	.48
23	37	2.40	.65	2.69	.47	2.54	.58
28	38	2.41	.56	2.43	.56	2.47	.55
39	39	2.35	.49	1.91	.82	2.10	.72
	Composite of four functions					2.43	

*Based on ranking of all thirty-nine functions

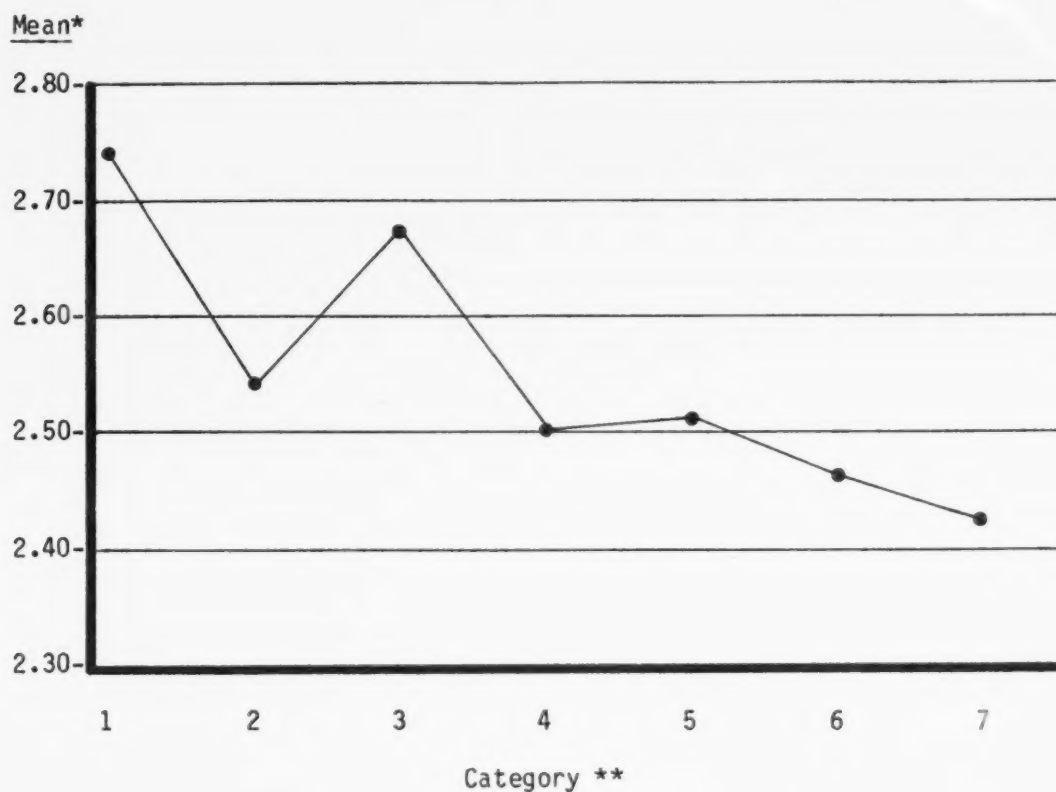
DISCUSSION, IMPLICATIONS, AND RECOMMENDATIONS

Discussion

The nursing functions were grouped into seven categories, and the composite means in each category were then calculated. Figure 1 illustrates the comparison of the composite means of the total responses for each category.

The functions in the category "Assessment" had the highest composite mean (2.73). The means of the responses for all functions in this category were also high as all were above 2.62 (see Table 4), which indicates that the preparedness level for each of the functions in this category was within the "well-prepared" range.

The category having the second highest composite mean of the total responses was the category "Implementing." The composite mean of the responses in this category was 2.68 which was within the



*Mean: Based on Scale of 1 to 3

**Categories: 1--Assessment 2--Planning
 3--Implementing 4--Evaluation
 5--Communication 6--Interpersonal Relationships
 7--Role as Health Team
 Member

Figure 1

Comparison of Means of Composite Responses for
 Nursing Functions in the Seven Categories

"well-prepared" range. However, considerable variance occurred in this category as the means of the individual functions ranged from a low 2.17, which was within the "moderately-prepared" range, to a high of 3.00, which was at the top of the "well-prepared" range. The means of ten of fifteen functions in this category were at or above 2.65.

The composite means of the functions in the other five categories were nearly the same, ranging from a low of 2.43 for the category "Role as a Health Team Member" to a high of 2.53 for the category "Planning." These composite means were within the high "moderately-prepared" and low "well-prepared" range.

All functions in the category "Planning" had a preparedness level within the high "moderately-prepared," low "well-prepared" range as the means ranged from 2.46 to 2.59 (see Table 5). The prepared level of the functions in the category "Interpersonal Relationships" was also very similar as their composite means ranged from 2.39 to 2.58 (see Table 9). The composite means of the two functions in the category "Evaluation" were almost identical, 2.49 and 2.51 (see Table 7). The graduates' level of preparedness in this category was at the transition point between "moderately-prepared" and "well-prepared."

The composite means of the functions in the category "Communication" were also very similar, ranging from 2.45 to 2.58. The preparedness level of the graduates was assessed to be within the high "moderately-prepared," low "well-prepared" range.

The composite mean of the functions in the category "Role as a Health Team Member" was the lowest at 2.43 (see Table 10). However, it was still within the acceptable "moderately-prepared" range. One of the functions in this category, number 39, "Participate in a referral process

to health/social agencies," had the lowest composite mean (2.10) for the category and for the study. The composite means of the rest of the functions in this category were similar, ranging from 2.47 to 2.60. The preparedness levels for the functions in this category, except number 39, were within the high "moderately-prepared," to the "well-prepared" range. The preparedness level for function 39 was near the midpoint of the "moderately-prepared" range.

The results of the study indicate there was considerable agreement between the assessment of the graduates' level of preparedness by employers and graduates as the response means for each group were not significantly different for twenty-two (56 percent) of the thirty-nine functions (see Table 2). However, the groups did not assess the preparedness levels of graduates similarly as the probability level (.05; two-tailed test) was less than .05 for seventeen functions.

Graduates assessed the preparedness levels of graduates higher than employers for sixteen of the seventeen functions for which a significant difference existed. Employers assessed the preparedness levels of graduates higher than graduates for only one function, 39, "Participate in a referral process to health/social agencies."

Implications

Evaluation of the preparedness level of nursing functions was accomplished through a survey of employers and graduates. The results of this study indicate that there is a significant difference in the assessment of the preparedness level of graduates' functions by the employer and the assessment of the preparedness level by the graduate for slightly less than half (44 percent) of the functions. The significant difference in means of employers' responses and means of graduates'

responses for seventeen of the thirty-nine functions (see Table 2) indicates there is a difference in those functions as assessed by employers and assessed by graduates. The ADN staff might, therefore, review instruction in these seventeen functions to determine what elements of the instruction in these functions leads graduates to have a different expectation than that of employers.

There does not seem to be a category of functions that uniformly contains functions that need to be addressed by the ADN staff for modification (see Tables 4 through 9). The category having the second lowest mean of composite responses (2.17) also has the largest mean of composite responses (3.00).

Recommendations

Based on the results of this study, it is recommended that:

1. The results of this study be used as supportive data for the level of effectiveness of the content and methodology in providing the ADN nursing program graduate with adequate training in the functions in which the ADN is trained.
2. The LTI ADN program staff address itself to the expectations of the seventeen functions in which there is a significant difference between the mean of the employers' responses and the mean of the graduates' responses to determine what differences in expectations exists between ADN nursing staff and employers in these functions.
3. The results of the study be submitted to the Wisconsin State Board of Nursing to indicate the employer and graduate support for the effectiveness of the LTI ADN program in providing adequately trained graduates to function in the types of facilities for which they were trained.

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NOTE: Chapter 38 is from the 1975 Wisconsin Statutes as effected by chapters 29, 273, 300 and 418, laws of 1977. This copy is subject to change prior to publication in the 1977 statutes.

CHAPTER 38

VOCATIONAL, TECHNICAL AND ADULT EDUCATION

38.001	Mission.	38.16	District tax levy.
38.01	Definitions.	38.18	Contracts and bidding.
38.02	Establishment.	38.20	Adjustment of assets and liabilities.
38.04	Board of vocational, technical and adult education; powers and duties.	38.22	Admission requirements.
38.06	District boundaries.	38.24	Fees and tuition.
38.08	Composition and organization of district board.	38.28	State aid.
38.10	Appointment of district board members.	38.29	District budget limitations.
38.12	District board duties.	38.30	Special aid for veterans.
38.14	District board powers.	38.31	Educational approval board.

38.001 Mission. The board shall be responsible for the initiation, development, maintenance and supervision of programs with specific occupational orientations below the baccalaureate level, including terminal associate degrees, training of apprentices and adult education below the professional level.

History: 1971 c. 100, 125, 211.

38.01 Definitions. In this chapter:

(1) "Board" means the board of vocational, technical and adult education.

(2) "District" means a vocational, technical and adult education district established under this chapter.

(3) "District board" means the district board in charge of the vocational, technical and adult education schools of a district.

(4) "School district" means a school district operating high school grades.

(5) "School board" means the school board in charge of the public schools of a school district.

(6) "School year" means the time commencing with July 1 and ending with the next succeeding June 30.

(7) "Associate degree program" means a 2-year, post-high school program in an area designated and approved by the board for which the course requirements are established by the board.

(8) "Collegiate transfer program" means a state-wide, full-time program, designated and approved by the board, in which the credits earned may be transferable to a 4-year institution of higher education.

(9) "Vocational diploma program" means a one- or 2-year, full-time program in an area designated and approved by the board for which

the course requirements are established by the board.

(10) "Vocational-adult program" means a part-time vocationally oriented program established by a district board which is approved by the state director under procedures established by the board.

History: 1971 c. 154, 211; 1975 c. 39.

38.02 Establishment. There is established under this chapter a system of vocational, technical and adult education to foster and maintain instruction in courses approved by the board in part-time and full-time day or evening classes. Every person at least the age specified in s. 118.15 (1) (b) who can profit thereby is eligible to receive instruction under this chapter and rules established by the board.

History: 1971 c. 154.

38.04 Board of vocational, technical and adult education; powers and duties. (1) **GENERAL.** The board shall determine the organization, plans, scope and development of vocational, technical and adult education. For state aid, credit determination and other purposes, the board shall establish criteria for the establishment of district schools and shall classify and name the district schools.

(2) **DIRECTOR.** The board shall appoint a director, outside the classified service, to serve at its pleasure.

(3) **STAFF.** The board shall appoint such staff as is necessary under the classified service. Three positions in addition to the director shall be filled outside the classified service.

(4) **TEACHER AND COURSE REQUIREMENTS.** (a) The qualifications of educational personnel and the courses of study for each program offered in district schools shall be approved by the

State of Wisconsin

BOARD OF VOCATIONAL, TECHNICAL & ADULT EDUCATION



VOCATIONAL,
TECHNICAL & ADULT
EDUCATION DISTRICTS
AND FULL-TIME CAMPUSES

14 WISCONSIN ADMINISTRATIVE CODE

(b) Present the completed plan for such change to the board for approval before implementation.

History: Cr. Register, December, 1979, No. 288, eff. 1-1-80.

N 2.05 Instruction. (1) There shall be objectives which give direction to planning student experiences.

(2) A variety of teaching methods shall be utilized to facilitate student learning.

(3) Criteria shall be utilized in the evaluation of student learning and in the selection of extended units.

(4) Clinical laboratory experience is required and shall be supervised by board approved nursing faculty.

(5) Administration shall provide conditions conducive to teaching.

History: Cr. Register, December, 1979, No. 288, eff. 1-1-80.

N 2.06 Evaluation. There shall be systematic and periodic evaluation of the total program to include:

(1) Organization and administration of the program.

(2) Curriculum.

(3) Resources and facilities.

(4) Teaching—learning methods.

(5) Faculty.

(6) Graduates.

History: Cr. Register, December, 1979, No. 288, eff. 1-1-80.

N 2.07 Educational facilities and resources. (1) The facilities and resources needed for development of the nursing program shall be provided by the institution.

(2) **PHYSICAL FACILITIES.** (a) The facilities shall be designed to meet the objectives of the nursing program and to facilitate administrative and instructional activities.

(b) Teaching space shall be based on the size of the student group and teaching methods used.

(c) The physical facilities shall include:

1. Classrooms, lecture-demonstration room, learning laboratory and conference rooms.

2. Offices equipped for administrative personnel, faculty and secretarial staff.

3. Storage space for equipment and instructional materials.

(3) **LIBRARY AND LEARNING RESOURCES.** (a) Instructional material shall be readily available for use in teaching and study by faculty members and students.

(b) Library holdings should include current references on nursing and related subjects.

Register, December, 1979, No. 288

II. An Advisory Committee Member can Assist in the Curriculum and Instructional Planning By:

1. Providing consultative expertise in:
 - a. the goals and objectives of the program.
 - b. the overall curriculum.
 - c. the content of the courses within the curriculum.
2. Determining the equipment to be purchased for instructional use. (All items over \$200.00 must have advisory committee action.)
3. Evaluating facilities for instruction.
4. Surveying the business and industrial community to determine job requirements as they would affect curriculum and course content. (This is part of the program of curriculum research and development.)
5. Procuring instructors for adult and extension courses.
6. Assist in development of special job preparatory, CETA, and extension courses to be conducted by the school.
7. Providing work experience situation for students. (This is a program in internship that is required in some programs and could be developed in other programs.)
8. Assist the coordinators in the development of a comprehensive library of technical books and periodicals.
9. Developing standards of completion for the various programs of the school.

III. The Advisory Committee and Advisory Committee Members can Assist the Youth in the Community and in School to Further their Education By:

1. Providing students with scholarships.
2. Providing part-time work for students.
3. Assist students by rewarding outstanding students at special occasions.
4. Participating in educational programs with the students.

IV. The Advisory Committee can also Assist the School and Faculty Members in Providing High Quality, Up-to-date Instruction By:

1. Providing speakers for instructors in the various classes within the curriculum.
2. Assisting instructors in attending special business and industrial conferences and meetings.
3. Assisting instructors in providing field trips for classes.
4. Making arrangements for instructors to meet with people from business and industry.
5. Providing opportunities for instructors to gain work experience in business and industry.

ADN TRAINING EFFECTIVENESS SURVEY

Re: _____

Instructions to Supervisor: Please indicate the degree to which you feel the above-named nurse was prepared to practice the following functions upon entering your facility by circling the number in the appropriate column to the right of the function.

The category NA should be used if this function is not applicable to your situation or has not been observed.

I feel that the nursing program has prepared the new RN to perform the following:

Category Assessment:	Not Applicable 0	Poorly Prepared 1	Moderately Prepared 2	Well Prepared 3
1. Identify physiological, emotional, sociological, and spiritual needs of clients.	0	1	2	3
2. Identify deviations from normal behavior or functional signs.	0	1	2	3
3. Gather and organize data relevant to the client's problem(s).	0	1	2	3
4. Take vital signs.	0	1	2	3
5. Observe physical condition.	0	1	2	3
Planning:				
6. Formulate objectives for nursing action.	0	1	2	3
7. Identify specific approaches to meet client's needs.	0	1	2	3
8. Develop nursing care plan which involves client and client's family.	0	1	2	3
9. Develop nursing care plans which consider special needs of the client.	0	1	2	3
10. Develop nursing care plans which incorporate suggestions from other personnel.	0	1	2	3
11. Discuss nursing care plans with nurse(s) in charge.	0	1	2	3

Implementing:

	Not 0 Applicable	Poorly 1 Prepared	Moderately 2 Prepared	Well 3 Prepared
12. Bathe client.				
13. Provide special skin care.	0	1	2	3
14. Give mouth care.	0	1	2	3
15. Turn or position client.	0	1	2	3
16. Assist client in getting up.	0	1	2	3
17. Feed or assist with feeding.	0	1	2	3
18. Assist with elimination.	0	1	2	3
19. Give medications.	0	1	2	3
20. Perform venipunctures for IV infusions.	0	1	2	3
21. Perform irrigations.	0	1	2	3
22. Apply dressings.	0	1	2	3
23. Perform suction.	0	1	2	3
24. Operate oxygen equipment.	0	1	2	3
25. Prepare client for tests and examinations.	0	1	2	3
26. Collect specimens.	0	1	2	3

Evaluation:

27. Evaluate outcomes of care according to the formulated objectives.	0	1	2	3
28. Make modifications in the nursing care plan based on the evaluation.	0	1	2	3

Communication:

29. Communicate observations effectively to others on staff in writing (charting, etc., and verbally).	0	1	2	3
30. Identify and interpret verbal and nonverbal communication of client.	0	1	2	3
31. Interview clients.	0	1	2	3
32. Utilize therapeutic communication skills with client.	0	1	2	3

Interpersonal Relationships:

	Not 0 Applicable	Poorly 1 Prepared	Moderately 2 Prepared	Well 3 Prepared
33. Interact effectively in a one-to-one relationship and/or a group setting.				
34. Identify barriers to communication between the nurse and the client; other staff members.	0	1	2	3
35. Utilize effective methods to facilitate communications with clients; other staff members.	0	1	2	3

Role as Health Team Member:

36. Define RN's role as a member of the health team.	0	1	2	3
37. Interact constructively with other members of the health team as a client advocate.	0	1	2	3
38. Coordinate nursing activities with those of other disciplines.	0	1	2	3
39. Participate in the referral process to health/social agencies.	0	1	2	3

ADN TRAINING EFFECTIVENESS SURVEY

Instructions to Graduate: Please indicate the degree to which your educational program prepared you to practice these functions by circling the number in the appropriate column to the left of the function.

I feel that the nursing program prepared me to perform the following:

Well Prepared	Moderately Prepared	Poorly Prepared	
			<u>Assessment:</u>
3	2	1	1. Identify physiological, emotional, sociological, and spiritual needs of clients
3	2	1	2. Identify deviations from normal behavior or functional signs
3	2	1	3. Gather and organize data relevant to the client's problem(s)
3	2	1	4. Take vital signs
3	2	1	5. Observe physical condition
			<u>Planning:</u>
3	2	1	6. Formulate objectives for nursing action
3	2	1	7. Identify specific approaches to meet client's needs
3	2	1	8. Develop nursing care plan which involves client and client's family
3	2	1	9. Develop nursing care plans which consider special needs of the client
3	2	1	10. Develop nursing care plans which incorporate suggestions from other personnel
3	2	1	11. Discuss nursing care plans with nurse(s) in charge

Well Prepared
Moderately Prepared
Poorly Prepared

Implementing:

- | | | | |
|---|---|---|---|
| 3 | 2 | 1 | 12. Bathe client |
| 3 | 2 | 1 | 13. Provide special skin care |
| 3 | 2 | 1 | 14. Give mouth care |
| 3 | 2 | 1 | 15. Turn and position client |
| 3 | 2 | 1 | 16. Assist client in getting up |
| 3 | 2 | 1 | 17. Feed or assist with feeding |
| 3 | 2 | 1 | 18. Assist with elimination |
| 3 | 2 | 1 | 19. Give medications |
| 3 | 2 | 1 | 20. Perform venipunctures for IV infusions |
| 3 | 2 | 1 | 21. Perform irrigations |
| 3 | 2 | 1 | 22. Apply dressings |
| 3 | 2 | 1 | 23. Perform suction |
| 3 | 2 | 1 | 24. Operate oxygen equipment |
| 3 | 2 | 1 | 25. Prepare client for tests and examinations |
| 3 | 2 | 1 | 26. Collect specimens |

Evaluation:

- | | | | |
|---|---|---|---|
| 3 | 2 | 1 | 27. Evaluate outcomes of care according to the formulated objectives |
| 3 | 2 | 1 | 28. Make modifications in the nursing care plan based on the evaluation |

Communication:

- | | | | |
|---|---|---|--|
| 3 | 2 | 1 | 29. Communicate observations effectively to others on staff in writing (charting, etc.) and verbally |
| 3 | 2 | 1 | 30. Identify and interpret verbal and nonverbal communication of client |
| 3 | 2 | 1 | 31. Interview clients |
| 3 | 2 | 1 | 32. Utilize therapeutic communications skills with client |

Well Prepared
Moderately Prepared
Poorly Prepared

Interpersonal Relationships:

- | | | | |
|---|---|---|---|
| 3 | 2 | 1 | 33. Interact effectively in a one-to-one relationship and/or in a group setting |
| 3 | 2 | 1 | 34. Identify barriers to communication between me and the client; other staff members |
| 3 | 2 | 1 | 35. Utilize effective methods to facilitate communication with clients; other staff members |

Role as Health Team Member:

- | | | | |
|---|---|---|---|
| 3 | 2 | 1 | 36. Define my role as a member of the health team |
| 3 | 2 | 1 | 37. Interact instructively with other members of the health team as the client advocate |
| 3 | 2 | 1 | 38. Coordinate nursing activities with those of other disciplines |
| 3 | 2 | 1 | 39. Participate in the referral process to health/social agencies |

APPENDIX G
Sample Letter to Nursing Director

56



Lakeshore
Technical Institute

1290 NORTH AVENUE CLEVELAND, WI 53015
PHONE (414) 693-8211

FREDERICK J. NIERODE, District Director

Dear Nursing Director:

The Nursing Division at Lakeshore Technical Institute is trying to determine the effectiveness of its Associate Degree Nursing program. To accomplish this, I would appreciate it if you would distribute the envelopes to the supervisor(s) responsible for the graduate indicated.

If you have any questions, please contact Mrs. Rachel Jackson, Nursing Division supervisor, or me at 1-800-242-7692.

Thank you for your assistance in this study. You will be sent a copy of the results of the study when they are completed.

Sincerely,

Marvin A. Schrader
Curriculum Specialist

MAS:bat

Enclosures

APPENDIX H
Sample Letter to Nursing Supervisor

57

 **Lakeshore
Technical Institute**
1290 NORTH AVENUE CLEVELAND, WI 53015
PHONE (414) 693-8211
FREDERICK J. NIERODE, District Director

Dear Nursing Supervisor:

The Nursing Division at Lakeshore Technical Institute is trying to determine the effectiveness of its Associate Degree Nursing program. To accomplish this, the staff would like to have the nurse directly responsible for the supervision of the graduate to complete the enclosed form and return it in the enclosed envelope.

The results will be used to modify the curriculum of the program to better serve the needs of the hospitals and other nursing agencies in our area. Therefore, a candid assessment of the graduate is extremely important.

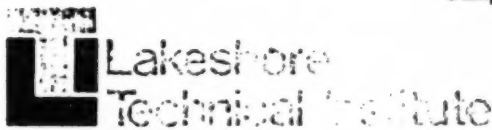
As this is important not only to you but to the entire nursing profession, we feel that you will want to help us in this endeavor. Thank you for your involvement in this important work.

Sincerely,

Marvin A. Schrader
Curriculum Specialist

MAS:bat

Enclosures



1290 NORTH AVENUE CLEVELAND, WI 53015
PHONE (414) 693-8211

FREDERICK J. NIERODE, District Director

Dear Associate Degree Nursing Graduate:

Lakeshore Technical Institute needs your help. You have been on the job for a period of time and have had time to reflect on the training you received at LTI with the needs you had as a newly employed nurse.

We need the evaluation you have made in order to determine the relevance of the content of the Associate Degree Nursing program. We will use the information to modify the content and objectives of the program as needed. This is especially true since the Associate Degree Nursing program at LTI is changing to meet the changing needs of the nursing agencies within the area.

With this in mind, please complete the enclosed form and return it to me in the enclosed postpaid envelope. I would appreciate an early return.

If you have any questions, please contact Mrs. Rachel Jackson, Nursing Division supervisor, or me at 1-800-242-7692. Thank you for your assistance in this survey.

Sincerely,

Marvin A. Schrader
Curriculum Specialist

MAS:bat

Enclosures



1290 NORTH AVENUE CLEVELAND, WI 53015
PHONE (414) 683-8211

FREDERICK J. NIERODE, District Director

Dear Associate Degree Nursing Graduate:

Several weeks ago, a survey form was sent to you. The completed survey has not been received, and it may be that it has gotten lost or misplaced.

As your responses are important to the process for evaluating the LTI Associate Degree Nursing program, I urge you to take the time needed to complete the enclosed form and send to me. The responses will be used to modify the curriculum and/or instruction.

If you have already returned the completed survey form within the last few days, please disregard this request. Please accept my thanks for your assistance and cooperation in this study.

Sincerely,

Marvin A. Schrader
Curriculum Specialist

MAS:bat

Enclosures

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